ASSOCIATE SANITARY ENGINEER	*EXAM DATE: *EFF DATE:	/ / *
HEALTH SERVICES, DEPARTMENT OF	*CLASS ID : *LIST TYPE: *CERT RULE: *LIST LIFE: *	PROM DEPT *
* SUMMARY	RANK	SCORE *
	3 CANDIDATE(S) 1	85%
	5 CANDIDATE(S) 2	76%
*	***NUMBER ON LIST: 8***	